

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005226

FILED
Apr 27, 2004
Secretary of State

Entity Name: OPEN DOOR CHRISTIAN CENTER OF TAMPA, INC.

Current Principal Place of Business:

3402 NORTH 26TH ST
TAMPA, FL 336051318

New Principal Place of Business:

Current Mailing Address:

3402 NORTH 26TH ST
TAMPA, FL 336051318

New Mailing Address:

FEI Number: 59-3564477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, TERRY PASTOR
7610 N NEWPORT AVE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, TERRY PASTOR
Address: 7610 N NEWPORT AVE
City-St-Zip: TAMPA, FL 33604

Title: VD () Delete
Name: JOHNSON, KATHY
Address: 7610 N NEWPORT AVE
City-St-Zip: TAMPA, FL 33604

Title: STD () Delete
Name: JOHNSON, IDRIS
Address: 7610 N NEWPORT AVE
City-St-Zip: TAMPA, FL 33604

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: IRVIN, TAMIKA
Address: 1244 BURDEN CT.
City-St-Zip: TAMPA, FL 33602

Title: STD () Change (X) Addition
Name: STACY, SHAWANA
Address: 22310 YACHT CLUB TERRACE
City-St-Zip: LAND O LAKES, FL 34639

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRY JOHNSON, PASTOR

PD

04/27/2004

Electronic Signature of Signing Officer or Director

Date